MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/539406

APPLICANT(S)

FILING DATE

5-17- CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1		1		51						
2						1	52						
3		⑧				1	53						
4		⑧		–	–	1	54						
5		⑧				1	55						
6		⑧				1	56						
7		⑧		⑧		⑧	57						
8		⑧		⑧		⑧	58						
9		⑧		⑧		⑧	59						
10		⑧		⑧		⑧	60						
11		⑧		⑧		⑧	61						
12		⑧		⑧		⑧	62						
13							63						
14							64						
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40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			1		1		TOTAL IND.						
TOTAL DEP.			11		11		TOTAL DEP.						
TOTAL CLAIMS			12		12		TOTAL CLAIMS						

PTO-1360 (REV. 11/04)